UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 3235-0076 OMB Number: March 15, 2009 Expires: Estimated average burden chours per form.....

ORIGINAL

TEMPORARY FORM D

MAR 2 7 2009

NOTICE OF SALE OF SECURITIES ON REUMATION DECLINATION PURSUANT TO REGULATION D

SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



Name of Offering ({ J check if this is an amend	00000.00						
Urban Infrastructure Real Estate Fund - L	imited Voting Class A Shares	<u> </u>					
Filing Under (Check box(es) that apply):	[] Rule 504 [] Rule 505	[x] Rule 506	[-]Section 4(6) [-] JULOE Received SEC			
Type of Filing: [] New Filing	[x] Amendment			Received SEC			
•	A. BASIC IDENT	IFICATION I	DATA				
I. Enter the information requested about the	MAR 0 9 2009						
Name of Issuer ([] check if this is an amendm	Washington DC 20540						
Urban Infrastructure Real Estate Fund				Washington, DC 20549			
Address of Executive Offices	per (Including Area Code)						
IFS Court, TwentyEight, Cybercity, Ebene,							
Address of Principal Business Operations	per (Including Area Code)						
(if different from Executive Offices) Same as							
Brief Description of Business Investments in real estate securities							
Type of Business Organization							
[] corporation	her (please specify): A Public Limited Life						
business trust	[] limited partnership, to	be formed		Company with Limited Liability			
	Mont	h Yea	r				
tual or Estimated Date of Incorporation or C]	[x] Actual					
[] Estimated							
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S	S. Postal Servic	e abbreviation for				
	CN for Canada; FN	for foreign juri	sdiction)	[FN]			

GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary From D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

¿C 1972 (9-08)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition, of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[x] Director							
Full Name (Last name first if ind	[] General and/or Managing Partner Full Name (Last name first, if individual)									
Shankardass, Arun	ividual)									
	Number and Street, City, State, Zip Code)									
Check Box(es) that Apply:	74, Buckingham Avenue, Whetstone, London, N20 9DH, UK Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [x] Director									
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [x] Director [] General and/or Managing Member										
Full Name (Last name first, if ind	ividual)									
Setia, Atul										
Business or Residence Address ()	Number and Street, City, State, Zip Code)									
6 Selvage Lane, London, NW7.	3SP, UK									
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[x] Director							
•••	[] General and/or Managing Member									
Full Name (Last name first, if ind	ividual)									
Khaitan, Sakate	·									
Business or Residence Address (1	Number and Street, City, State, Zip Code)	<u> </u>								
Flat 2, 51 Marlborough Hill, Lo										
Check Box(es) that Apply:	Promoter Beneficial Owner	[] Executive Officer	[x] Director							
4,7	[] General and/or Managing Member	()	[,							
Full Name (Last name first, if ind										
Joory, Kapil Dev	· · · · · · · · · · · · · · · · · · ·									
	Number and Street, City, State, Zip Code)									
IFS Court, Twenty Eight, Cyber	•									
Check Box(es) that Apply:	Promoter Beneficial Owner	Executive Officer	[x] Director							
encer beries, that repply.	General and/or Managing Member	[] Baccaire Officer	(A) Director							
Full Name (Last name first, if ind			······································							
Soreefan, Abdool Fareed	rriduu)									
	Number and Street, City, State, Zip Code)									
IFS Court, TwentyEight, Cyber										
Check Box(es) that Apply:	[x] Promoter [] Beneficial Owner	[] Executive Officer	[] Director							
Check Box(cs) that Appry.	[] General and/or Managing Partner	[] Executive Officer	[] Director							
Full Name (Last name first, if ind	ividual)									
Urban Infrastructure Capital A										
	Number and Street, City, State, Zip Code)									
IFS Court, TwentyEight, Cyber	•									
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	Executive Officer	Director							
Check Box(es) that Apply.	[] General and/or Managing Partner	[] Executive Officer	[] Director							
Full Name (Last name first, if ind										
run Name (Last name 1115), ii mu	(Viduar)									
D										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Charle Day(as) that A - where	[] Decreates [] [] Decreates	(F	[1D:							
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[Executive Officer	[] Director							
[] General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Dustriess of Residence Address (Pulliber and Street, City, State, Zip Code)										
										
	(Use blank sheet, or copy and use additional copie	es of this sheet, as necessary.)								

•					B. INF	ORMA	ΓΙΟΝ ΑΕ	OUT O	FFERING	3			
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.									Yes No				
2. What is the minimum investment that will be accepted from any individual?								\$500,000*					
*For individual investor. The Board may, in its sole discretion, accept capital commitments for lesser amounts **For institutional investors. The Board may, in its sole discretion, accept capital commitments for lesser amounts										\$10,000,000** Yes No			
3. Does the offering permit joint ownership of a single unit?									[x] []				
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)												
	siness or Resid				od Cina St	nto 7:- C							
461	Fifth Avenue	, New You	rk, NY 101		æi, Cily, Si	ale, Zip Ci							
	ne of Associate CI Securities		or Dealer										
	tes in Which Po		d Has Soli	cited or In	tends to So	licit Purch	asers						
	(Check	"All States	" or check	individua	l States)	••••			***************		******		[] All States
	[AL] [✓IL] [MT] [RI]	[AK] [~IN] [NE] [~SC]	[✓AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[[CT] [ME] [NY] [VT]	[DE] [MD]	[\(DC \) [\(MA \) [ND \) [WA \]	[✓FL]	[✓GA] [MN] [OK] [✓WI]	[HI] MS] [OR] [~WY]	[ID] [✓MO] [PA]
Ful	l Name (Last n	ame first, i	f individua	al)				-	·				
	iness or Resid					ate, Zip Co	ode)						
Nar	forld Financia ne of Associate rrill Lynch, Pa	ed Broker o	or Dealer										
	tes in Which Po					licit Purch	asers						
	(Check	"All States	" or check	individua	l States)						••••••		[✓] All States
	(AL) (IL) (MT) (RI)	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Ful.	Name (Last n	ame first, i	f individua	ıl)						* -			
Bus	iness or Reside	ence Addre	ss (Numb	er and Stre	et, City, St	ate, Zip Co	ode)						
Name of Associated Broker or Dealer													
Stat	es in Which Pe	erson Liste	d Has Soli	cited or In	tends to So	licit Purch	asers						
(Check "All States" or check individual States)													
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
	<u>-</u>		(Use blank	sheet, or co	opy and us	e additions	al copies o	f this sheet	as necess	sary.)		

I.	amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an		
	exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	_ \$
	Equity (Limited Voting Class A Shares)	\$ 500,000,000	\$ 11,225,000
	[] Common [] Preferred		
	Convertible Securities (including warrants)	\$	_
	Partnership Interests	\$	_ \$
	Other (specify)	\$	_
	Total	\$ 500,000,000	\$_11,225,000
	Answer also in Appendix, Column 3, if filing Under ULOE		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	is note of Z.io.	Number	Aggragata Dollar Amount
		Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	6	\$ 11,225,000
	Non-accredited Investors	0	\$ 0
	Total (for filings Under Rule 504 Only)	N/A	\$ N/A
	Answer also in Appendix, Column 4 if filing under ULOE		
э.	If this filing is for an offering Under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	
	Regulation A	N/A	\$ <u>N/A</u>
	Rule 504	N/A	\$ <u>N/A</u>
	Total	N/A	\$N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		
	Printing and Engraving Costs]] \$ <u>95,150</u>
	Legal Fees	[x] \$ <u>1,073,889</u>
	Accounting Fees	[x	S
	Engineering Fees	[\$
	Sales Commissions (Specify finder's fees separately)	[§ 6,369,448
	Other Expenses (identify): marketing expenses	[x] \$ <u>289,043</u>
	Total	[x	\$ <u>7,827,530</u>

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, NUMBER OF INVE	STORS, EXI	PENS	ES AND USE OF PRO	OCEEDS
	b. Enter the difference between the aggregate offering price given in — Question 1 and total expenses furnished in response to Part C — C difference is the "adjusted gross proceeds to the issuer."	uestion 4.a. Th	his		\$ _492,172,470
5.	Indicate below the amount of the adjusted gross proceeds to the proposed to be used for each of the purposes shown. If the amount not known, furnish an estimate and check the box to the left of the e of the payments listed must equal the adjusted gross proceeds to the response to Part C – Question 4.b above.	for any purpose stimate. The to	is tal		
				Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees	[1	\$[]	\$
	Purchase of real estate	[1	\$[]	\$
	Purchase, rental or leasing and installment of machinery and equ	ipment[1	\$	\$
	Construction or leasing of plant buildings and facilities	[]	\$ []	\$
	Acquisition of other businesses (including the value of securitie in this offering that may be used in exchange for the assets of se of another issuer pursuant to a merger)	curities]	\$[]	\$
	Repayment of indebtedness	[1	\$[]	\$
	Working capital	[1	\$[]	s
	Other: Investments in real estate securities	[1	\$[x]	\$_492,172,470
	Column totals	[]	\$[x]	\$492,172,470
	Total payments listed (column totals added)	······		[x] \$ <u>492,172,470</u>	
	D. FEDERA	L SIGNATURI	<u></u>		
constitute	er has duly caused this notice to be signed by the undersigned duly authes an undertaking by the issuer to furnish to the U.S. Securities and Excreto any non-accredited investor pursuant to paragraph (b)(2) of Rule 50	hange Commiss	f this n sion, up	otice is filed under Rule 50: on written request of its sta	5, the following signature ff, the information furnished by
Issuer (P	rint or Type)	Signature		1	Date
Urban	Infrastructure Real Estate Fund				3 March 2009
Name of	Signer (Print or Type)	Title of Signer	(Print	or Type)	l , <u></u>
Ву: Ка	Director				

END

Attention

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)